

**LAUDERDALE COUNTY DETENTION FACILITY
RESPONSE TO RESISTANCE REPORT**

DATE: 5/24/14 TIME: 1949 LOCATION: Allen Swamp Rd
DEPUTY/OFFICER'S NAME: Dylan Anderson CASE #: 2014007567
ON SCENE/NOTIFIED SUPERVISOR(S): Kris Coker
NUMBER 1 AND NAMES OF OTHER DEPUTIES/OFFICERS PRESENT: Ruston Russell, Wesley Stevens, Allan Wymen
Trooper Jerom Moore, Andy Skel, Steve Thomas, Jacob Mathis
ANY OTHER DEPUTIES/OFFICERS USE FORCE: ☒ N IF YES, ADDITIONAL FORMS ATTACHED: ☒ N
ANY DEPUTIES/OFFICERS INJURED ☒ N IF YES, NAME(S): Ruston Russell
DESCRIBE INJURIES TO DEPUTY/OFFICER: Cuts on Forearm

DEPUTY/OFFICER TREATED BY: FIRE DEPT _____ AMBULANCE ☒ HOSPITAL _____
ATTENDING PHYSICIAN _____ JAIL MEDICAL STAFF _____

NATURE OF INCIDENT: 10-53/10-55

INCIDENT TYPE/REASON FOR USE OF FORCE (circle appropriate responses below):

Hostage Taker Suicidal Violent/Combative Offender Barricaded Resistive Restraint (for Offender's safety) Accidental Other

AT THE TIME OF THE INCIDENT, THE SUBJECT WAS (check appropriate responses below):

☒ Under the influence of alcohol/illegal drugs/prescription drugs ☒ Mentally impaired _____ Other: _____

CHARGES FILED AGAINST OFFENDER: Dis Conduct x 3, Resisting Arrest, DUI 1st,
Dis Traffic Rev SUSPECT BOOKED: Y/N

OFFENDER INFORMATION

NAME: Glenn Kesper ADDRESS: 8990 Massey Estates Dr
PHONE NUMBER: _____ SSN: 2696 DATE OF BIRTH: 1/63

SEX: ☒ M ☐ F HEIGHT: 5-5 WEIGHT: 130 RACE: W DISABILITY(S): _____

DESCRIBE OFFENDER CLOTHING (heavy, light, thin, loose etc.): light

ANY INJURIES TO OFFENDER PRIOR TO USE OF FORCE: ☒ N

ANY INJURIES AFTER USE OF FORCE: ☒ N CUTS, SCRAPES

OFFENDER TREATED BY: FIRE DEPT ☒ AMBULANCE ☒ HOSPITAL ☒
ATTENDING PHYSICIAN ☒ JAIL MEDICAL STAFF ☒

TRANSPORTED BY: _____ AMBULANCE _____ SHERIFF'S DEPT _____ OTHER _____ ADMITTED ☒ Y/N

OTHER OFFENDERS/WITNESSES ON SCENE: ☒ N

OFFENDERS/WITNESS (circle one) NAME: _____ PHONE # _____

OFFENDERS/WITNESS (circle one) NAME: _____ PHONE # _____

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RESPONSE TO RESISTANCE REPORT

LEVELS OF RESISTANCE and CORRESPONDING LEVELS OF CONTROL/FORCE (check all that apply)

- ☐ LEVEL 1 COMPLIANT: _____
COOPERATIVE CONTROLS: _____
- ☐ LEVEL 2 PASSIVELY RESISTANT: _____
CONTACT CONTROLS: _____
- ☒ LEVEL 3 ACTIVELY RESISTANT: attempting to flee and fight
COMPLIANCE (chemical, takedown, taser etc.): Controlled Take down
- ☐ LEVEL 4 ASSAULTIVE (bodily harm): _____
DEFENSIVE TACTICS (impact weapon, closed hand etc.): _____
- ☐ LEVEL 5 ASSAULTIVE (serious threat of bodily harm or death): _____
DEADLY FORCE: _____

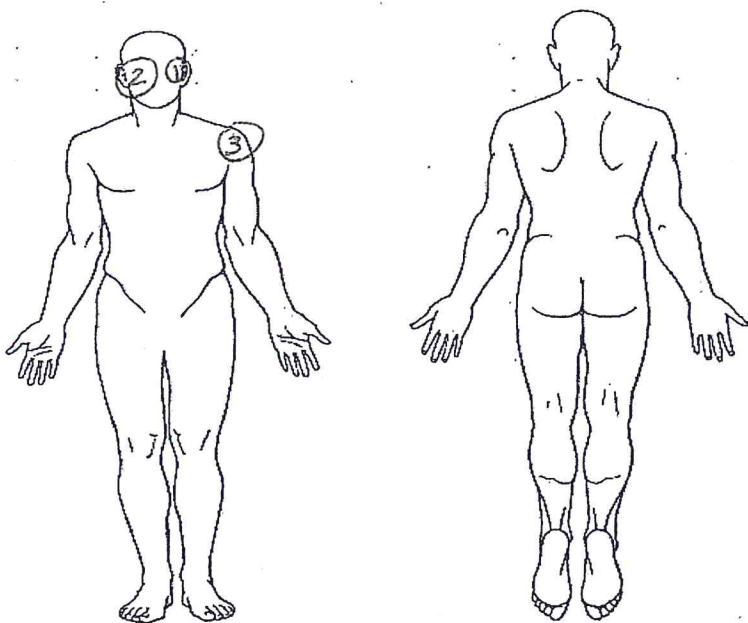
APPLICATION AREAS

Place a number in the location of the application of force on the diagram to the left.

Using the numbered area below, describe the type of force corresponding with the number on the diagram.

Example: 1. TASER Probe

1. Cut
2. Cut
3. Scrape
4. _____
5. _____
6. _____



POST-INCIDENT OBSERVATION

IMMEDIATELY FOLLOWING INCIDENT: Combative

15 MINUTES FOLLOWING INCIDENT: Combative

30 MINUTES FOLLOWING INCIDENT: Verbally Violent

☒ NARRATIVE/INCIDENT REPORT ATTACHED ☒ SUPPLEMENTAL TASER/CHEMICAL SPRAY FORM ATTACHED

☒ PHOTOGRAPHS TAKEN BY: Anderson ☒ PHOTOGRAPHS ATTACHED

REPORTING DEPUTY/OFFICER SIGNATURE

SUPERVISOR SIGNATURE

DIVISION COMMANDER SIGNATURE

CHIEF DEPUTY'S SIGNATURE

SHERIFF'S SIGNATURE

Form #31

[Signature] L27
[Signature] L26
[Signature] L4
Billy Sili

DATE 5/25/14

DATE 5/25/14

DATE 02 OCT 14

DATE 10/2/14

DATE 1/27/15